

ORDER FOR SUPPLIES OR SERVICES										PAGE 1 OF 6		
1. CONTRACT PURCH ORDER/AGREEMENT NO. <div style="border: 1px solid black; padding: 2px;">DAAE07-00-D-M001</div>			2. DELIVERY ORDER/CALL NO. <div style="border: 1px solid black; padding: 2px;">0208</div>		3. DATE OF ORDER/CALL (YYYYMMDD) <div style="border: 1px solid black; padding: 2px;">2003APR21</div>		4. REQUISITION/PURCH REQUEST NO. <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div>		5. PRIORITY <div style="border: 1px solid black; padding: 2px;">DOA4</div>			
6. ISSUED BY TACOM AMSTA-AQ-ALDA BARBARA FIANTACO (586)574-7280 WARREN, MICHIGAN 48397-5000 EMAIL: FIANTACB@TACOM.ARMY.MIL HTTP://CONTRACTING.TACOM.ARMY.MIL			CODE <div style="border: 1px solid black; padding: 2px;">W56HZV</div>		7. ADMINISTERED BY (If other than 6) DCMA BIRMINGHAM BURGER PHILLIPS CENTER 1910 THIRD AVE. NORTH, RM 201 BIRMINGHAM, AL 35203-2376			CODE <div style="border: 1px solid black; padding: 2px;">S0101A</div>		8. DELIVERY FOB <input type="checkbox"/> DESTINATION <input checked="" type="checkbox"/> OTHER (See Schedule if other)		
9. CONTRACTOR C NONE HQ0338			CODE <div style="border: 1px solid black; padding: 2px;">OMWW4</div>		FACILITY <div style="border: 1px solid black; padding: 2px;"></div>		10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div>		11. X IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMAN-OWNED			
NAME AND ADDRESS CAMBER CORPORATION 635 DISCOVERY DRIVE HUNTSVILLE, AL 35806 TYPE BUSINESS: Large Business Performing in U.S.			12. DISCOUNT TERMS <div style="border: 1px solid black; padding: 2px;"></div>		13. MAIL INVOICES TO THE ADDRESS IN BLOCK <div style="border: 1px solid black; padding: 2px;">See Block 15</div>							
14. SHIP TO <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div>			CODE <div style="border: 1px solid black; padding: 2px;"></div>		15. PAYMENT WILL BE MADE BY DFAS-COLUMBUS CENTER DFAS-CO/SOUTH ENTITLEMENT OPERATION P.O. BOX 182264 COLUMBUS, OH 43218-2264				CODE <div style="border: 1px solid black; padding: 2px;">HQ0338</div>		MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2	
16. TYPE OF ORDER <div style="display: flex; justify-content: space-between;"> <div style="width: 15%;">DELIVERY/CALL</div> <div style="width: 10%; text-align: center;">X</div> <div style="width: 75%;">THIS DELIVERY ORDER IS ISSUED ON ANOTHER GOVERNMENT AGENCY OR IN ACCORDANCE WITH AND SUBJECT TO TERMS AND CONDITIONS OF ABOVE NUMBERED CONTRACT.</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 15%;">PURCHASE</div> <div style="width: 10%; text-align: center;">Reference your <input type="checkbox"/> Oral <input type="checkbox"/> Written Quotation _____, Dated _____.</div> <div style="width: 75%;">furnish the following on terms specified herein.</div> </div> <div style="border: 1px solid black; padding: 2px; margin-top: 2px;">ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.</div>												
<div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> <div style="width: 30%;">NAME OF CONTRACTOR</div> <div style="width: 30%;">SIGNATURE</div> <div style="width: 30%;">TYPED NAME AND TITLE</div> <div style="width: 10%;">DATE SIGNED (YYYYMMDD)</div> </div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> <input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies: </div>												
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div>												
18. ITEM NO.		19. SCHEDULE OF SUPPLIES/SERVICE			20. QUANTITY ORDERED/ACCEPTED*		21. UNIT	22. UNIT PRICE		23. AMOUNT		
		SEE SCHEDULE CONTRACT TYPE: Cost-Plus-Fixed-Fee KIND OF CONTRACT: System Acquisition Contracts										
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.					24. UNITED STATES OF AMERICA JUDITH K. BUSHA /SIGNED/ BUSHAJ@TACOM.ARMY.MIL (586) 574-7041 BY: _____ CONTRACTING/ORDERING OFFICER					25. TOTAL <div style="border: 1px solid black; padding: 2px;">\$207,673.04</div>		
27a. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO CONTRACT EXCEPT AS NOTED _____												
b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE					c. DATE (YYYYMMDD)		d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE					
e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE					28. SHIP. NO. <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		29. D.O. VOUCHER NO.		30. INITIALS <div style="border: 1px solid black; padding: 2px;"></div>			
f. TELEPHONE NUMBER		g. E-MAIL ADDRESS			31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		32. PAID BY		33. AMOUNT VERIFIED CORRECT FOR			
36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.									34. CHECK NUMBER			
a. DATE (YYYYMMDD)		b. SIGNATURE AND TITLE OF CERTIFYING OFFICER							35. BILL OF LADING NO.			
37. RECEIVED AT		38. RECEIVED BY (Print)		39. DATE RECEIVED (YYYYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.		

CONTINUATION SHEET	Reference No. of Document Being Continued PIIN/SIIN DAAE07-00-D-M001/0208 MOD/AMD	Page 2 of 6
Name of Offeror or Contractor: CAMBER CORPORATION		

SUPPLEMENTAL INFORMATION

PROGRAM: OMNIBUS PROGRAM & ENGINEERING SUPPORT SERVICES

CONTRACT: DAAE07-00-D-M001/0208 OPT YR 4

PURPOSE OF ORDER: FAASV/Paladin Program

TOTAL AMOUNT: \$207,673.04

1. This action is Task Order number 0208 issued pursuant to Contract DAAE07-00-D-M001.
2. The purpose of this order is to exercise option for 3,228 hours pursuant to Special Provisions H.1.4. This order will provide configuration support to the FAASV/Paladin Program.
3. This is a unilateral order for 3,228 man-hours of level of effort, awarded on Cost Plus Fixed Fee basis in the amount of \$207,673.04. This includes \$194,551.12 cost and \$13,121.92 fixed fee.
4. The Contractor shall perform this order 0208 in accordance with the Scope of Work in Section C and Work Directive CAM-0208.
5. The period of performance is from 1 May 03 through 29 Feb 04.

6. PAYMENT

The contractor shall submit monthly invoices for payment for work performed in the previous month.

7. INVOICE INSTRUCTIONS

In accordance with the Prompt Payment clause (FAR 52.232-25), the following additional invoice instructions apply to this contract. On each billing document prepared by the contractor, the CLIN/SUBCLIN applicable to that billing shall be specified. Where there is one ACRN applicable to the particular CLIN/SUB/CLIN being billed, the ACRN shall be specified as well.

8. PAYMENT INSTRUCTIONS FOR DFAS

- a. In accordance with the Prompt Payment clause (FAR 52.232-25), the following additional invoice instructions apply to this contract.
- b. The paying office shall pay each invoice only with the funds obligated under the CLIN/SUBCLIN specified on the voucher. Payments shall be made first from the oldest funds by fiscal year applicable to each individual CLIN. The oldest funds shall be disbursed in their entirety before proceeding to disburse the next ACRN.

Name of Offeror or Contractor: CAMBER CORPORATION

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT									
	SUPPLIES OR SERVICES AND PRICES/COSTS													
0001	SECURITY CLASS: Unclassified													
0001AA	<div>SERVICES LINE ITEM</div> <div>NOUN: CAMBER SPT/OMNIBUS PRON: 7232C00572 PRON AMD: 02 ACRN: AA AMS CD: 42212300000 NOUN: To provide support to FAASV/Paladin Program Level of Effort: 3,228 Man-hours WD: CAM-208 Estimated Cost: \$194,551.12 Fixed Fee: \$ 13,121.92 Total Estimated Cost: \$207,673.04 <div>(End of narrative B001)</div> <div>Inspection and Acceptance</div><div>INSPECTION: Destination ACCEPTANCE: Destination</div> <div>Deliveries or Performance</div><table><tr><td>DLVR SCH</td><td></td><td>PERF COMPL</td></tr><tr><td><u>REL CD</u></td><td><u>QUANTITY</u></td><td><u>DATE</u></td></tr><tr><td>001</td><td>0</td><td>29-FEB-2004</td></tr></table><div>\$ 152,877.00</div></div>	DLVR SCH		PERF COMPL	<u>REL CD</u>	<u>QUANTITY</u>	<u>DATE</u>	001	0	29-FEB-2004				\$ 152,877.00
DLVR SCH		PERF COMPL												
<u>REL CD</u>	<u>QUANTITY</u>	<u>DATE</u>												
001	0	29-FEB-2004												
0001AB	<div>SERVICES LINE ITEM</div> <div>NOUN: CAMBER SPT/OMNIBUS PRON: A126K023J7 PRON AMD: 02 ACRN: AB AMS CD: 31203638015 NOUN: To provide support to the FAASV/Paladin Program FUNDING SUPPORT FOR CLIN 0001AA</div>				\$ 54,796.04									

Name of Offeror or Contractor: CAMBER CORPORATION

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT						
	<div>(End of narrative B001)</div> <div><u>Inspection and Acceptance</u> INSPECTION: Destination ACCEPTANCE: Destination</div> <div><u>Deliveries or Performance</u> DLVR SCH PERF COMPL <table><tr><td><u>REL CD</u></td><td><u>QUANTITY</u></td><td><u>DATE</u></td></tr><tr><td>001</td><td>0</td><td>29-FEB-2004</td></tr></table><div>\$ 54,796.04</div></div>	<u>REL CD</u>	<u>QUANTITY</u>	<u>DATE</u>	001	0	29-FEB-2004				
<u>REL CD</u>	<u>QUANTITY</u>	<u>DATE</u>									
001	0	29-FEB-2004									

CONTINUATION SHEET	Reference No. of Document Being Continued PIIN/SIIN DAAE07-00-D-M001/0208 MOD/AMD	Page 5 of 6
Name of Offeror or Contractor: CAMBER CORPORATION		

DELIVERIES OR PERFORMANCE

F.1 Period of Performance

Period of performance for the work set forth in WD CAM-0208 1 May 03 through 29 Feb 04.

*** END OF NARRATIVE F 001 ***

CONTRACT ADMINISTRATION DATA

							JOB				
LINE	PRON/	OBLG					ORDER	ACCOUNTING		OBLIGATED	
ITEM	AMS CD	ACRN	STAT	ACCOUNTING CLASSIFICATION			NUMBER	STATION	AMOUNT		
0001AA	7232C00572	AA	2	21	32020000035R5R16P42212331E9	S20113	3ZGV03	W56HZV	\$	152,877.00	
42212300000											
0001AB	A126K023J7	AB	2	21	22033000026D6D14P31203631E9	S20113	2ZFA20	W56HZV	\$	54,796.04	
31203638015											
									TOTAL	\$	207,673.04
SERVICE							ACCOUNTING		OBLIGATED		
NAME	TOTAL BY ACRN		ACCOUNTING CLASSIFICATION			STATION	AMOUNT				
Army	AA		21	32020000035R5R16P42212331E9	S20113	W56HZV	\$	152,877.00			
Army	AB		21	22033000026D6D14P31203631E9	S20113	W56HZV	\$	54,796.04			
									TOTAL	\$	207,673.04